								Application or Docket Number					
patent application fee determination record													
Effective December 29, 1999 99/645,019													
Claims as filed - Part I								MALL	ENTITY		OTHER	1	
(Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA							TYPE		OR	SMALL			
FOR NUMBER FILE				H FILED	NOMBER	EXTRA		RATE	FEE		RATE	FEE	
BASIC FEE					. All			345.00	OR		690.00		
TOTAL CLAIMS			30	minus 2	20= • ()	• 10		X\$ 9=		OR	X\$18=	18 0	
INDEPENDENT CLAIMS 3 = *								X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT							-	+130=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	270	
,	12/14 C	S AS A	MENDED				발	OTHER	THAN				
(Column 1) (Column 2) (Column 3)							S	MALL	ENTITY	OÀ	SMALL		
ENTA		REMA AF	UMS UNING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDAGENT	Total	. 19	3	Minus	730	=	>	K\$ 9=		OR	X\$18=		
	Independent	· 9	23	Minus	3	=		X39=		OR	X78=		
	FIRST PRESE	NTATIO	N OF MU	ILTIPLE DEF	PENDENT CLAIM				<u> </u>				
					•	. •		130=		OR	+260=		
							ADI	TOTAL DIT. FEE	<u>. </u>	OR	ADDIT. FEE	<u> </u>	
		mn 1)			ì (
ENT B		REMA AF	UNING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MENDMENT	Total	•		Minus	n n	=)	(\$ 9=		OR	X\$18=		
	Independent	•	1.05.44	Minus ,	OFF	=	\	(39=		OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+	130=		OR	+260=		
(Column 1) (Column 2) (Column 3)							`A.D.	TOTAL		OR	TOTAL ADDIT. FEE		
							AUL	DIT. FEE	·	,	. FEEL		
CLAIMS REPORT HIGHEST									ADDI-			ADDI-	
AMENDMENT C		AF	UNING TER DMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL FEE	
SE	Total ·	•	•	Minus	44	=	\[\rac{1}{2}\]	(\$ 9= ·		OR	X\$18=		
	Independent	•		Minus	***	=	-	(39=			X78=		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							103=		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								130=		OR	+260=		
**	I the Highest Nur	mber Pre	viously Pa	id For IN THIS	S SPACE is less that	in 20, enter "20."	ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE		
****	If the "Highest Non	mber Pre	viously Pa	aid For IN THI	S SPACE is less that Independent) is the	an 3. enter "3."		_	propriate box				